

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | 1-13-01 |
| O.I.P.E. CLASSIFIER | MM | | 2/16/01 |
| FORMALITY REVIEW | CD | 775 | |
| RESPONSE FORMALITY REVIEW | MP | JCSW | 10/10/01 |

INDEX OF CLAIMS

| | | | |
|---------------------------|------------|---------|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| — (Through numeral) | Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

| Claim | Date |
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| Final | Original |
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| Claim | Final | Original | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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10-325
8.10-01
R.F.E. P-886
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